

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

MATT ROSENDALE FOR MONTANA

ADDRESS (number and street)

1954 HWY 16

Check if different  
than previously  
reported. (ACC)

GLEN DIVE

MT

59330

2. FEC IDENTIFICATION NUMBER ▼

C

C00548289

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
07 / 31 / 2013

through

M M / D D / Y Y Y Y  
09 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Bill VanCanagan

Signature of Treasurer

Mr. Bill VanCanagan

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
11 / 01 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 35

Write or Type Committee Name

MATT ROSENDALE FOR MONTANA

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	70899.95	70899.95
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	70899.95	70899.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	40572.92	40572.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	40572.92	40572.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	280327.03	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	250812.40	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**MATT ROSENDALE FOR MONTANA**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

63500.00

63500.00

**(ii) Unitemized.....**

6399.95

6399.95

**(iii) TOTAL of contributions from individuals ▶**

69899.95

69899.95

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

1000.00

1000.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

70899.95

70899.95

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

250000.00

250000.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

250000.00

250000.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

320899.95

320899.95

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40572.92	40572.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	40572.92	40572.92

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	320899.95
25. SUBTOTAL (add Line 23 and Line 24).....	320899.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40572.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	280327.03

: 97 'A -G7 9 @ @ B9 CI G 'H9 LH 'F9 @ H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB  
.

Form/Schedule: F3A

Transaction ID :

The Matt Rosendale for Montana committee is amending the October 15, 2013 quarterly report to correct the partnership attribution for the \$350 contribution from DM&L Partners (page 9 of the original filing). Please note that the partner's election cycle to date total contributions are less than \$200 and as such are unitemized on this filing.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Julie M. Baldrige**

Mailing Address P.O. Box 607

City	State	Zip Code
Whitefish	MT	59937

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HomemakerOccupation  
Homemaker

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : SA11AI.4220

Amount of Each Receipt this Period

2600.00

**B. Summerfield C. Baldrige**

Mailing Address P.O. Box 607

City	State	Zip Code
Whitefish	MT	59937

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montana Oil PropertiesOccupation  
Oil & Gas Development

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2013

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period

2600.00

**C. Deborah L. Barrett**

Mailing Address 18580 Hwy 324

City	State	Zip Code
Dillon	MT	59725-8031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Rancher

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2013

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Scott D. Boulanger**

Mailing Address PO Box 733

City

Darby

State

MT

Zip Code

59829

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Outfitter

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2013

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**John C. Brenden**

Mailing Address PO Box 970

City

Scobey

State

MT

Zip Code

59263

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2013

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mark Callahan**

Mailing Address 10504 Cordova Rd.

City

Easton

State

MD

Zip Code

21601-6520

FEC ID number of contributing federal political committee.

C

Name of Employer

Callahan's Appliance

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2013

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 8 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Margaret A. Callahan-Palazzolo**

Mailing Address 9220 Fox Meadow Lane

City	State	Zip Code
Eason	MD	21601

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Callahan's Appliance

 Occupation  
 Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		17		2013

**Transaction ID : SA11AI.4235**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Harriet S. Caporin**

Mailing Address 317 Devers Branch Rd.

City	State	Zip Code
Centreville	MD	21617-1946

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Homemaker

 Occupation  
 Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		03		2013

**Transaction ID : SA11AI.4237**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Pat Carney**

Mailing Address PO Box 444

City	State	Zip Code
Glendive	MT	59330

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Assoc. Insurance Managers

 Occupation  
 Insurance

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		28		2013

**Transaction ID : SA11AI.4238**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Linda Conradsen**

Mailing Address 10761 CR 344

City

Savage

State

MT

Zip Code

59262

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 28 2013

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Rosa Cordova**

Mailing Address PO Box 281

City

Glendive

State

MT

Zip Code

59330-0281

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
08 17 2013

Transaction ID : SA11AI.4241

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Rosa Cordova**

Mailing Address PO Box 281

City

Glendive

State

MT

Zip Code

59330-0281

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
08 17 2013

Transaction ID : SA11AI.4242

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5450.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**DM&L Partnership**

Mailing Address 201 W. Main St., Suite 201

City

Missoula

State

MT

Zip Code

59802

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2013

Transaction ID : SA11AI.4395

Amount of Each Receipt this Period

350.00

See Attribution Below - Partners exceeding reporting threshold itemized as memos.

Full Name (Last, First, Middle Initial)

**James A. Donahue**

Mailing Address 3216 6th Ave. South

City

Great Falls

State

MT

Zip Code

59405

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Davis, Hatley, Haffeman &amp; Tighe PC

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2013

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Jeff Essman**

Mailing Address PO Box 80945

City

Billings

State

MT

Zip Code

59108

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Real Estate Development

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2013

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2350.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**David P. Feller**

Mailing Address 1120 Three Degree Rd.

City

Butler

State

PA

Zip Code

16002-7908

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2013

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Jennifer Olsen Fielder**

Mailing Address P.O. Box 2558

City

Thompson Falls

State

MT

Zip Code

59873

FEC ID number of contributing federal political committee.

C

Name of Employer

State of Montana

Occupation

State Senator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2013

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Carlos G. Garza**

Mailing Address 26327 Pin Oak Dr.

City

Magnolia

State

TX

Zip Code

77354

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2013

Transaction ID : SA11AI.4253

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Greg R. Gianforte**

Mailing Address 1320 Manley Road

City

Bozeman

State

MT

Zip Code

59715

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Entrepreneur

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2013

Transaction ID : SA11AI.4254

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Larry Heimbuch**

Mailing Address 1263 Road 261

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2013

Transaction ID : SA11AI.4262

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Brecky Hill**

Mailing Address 5 Kensington Place

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2013

Transaction ID : SA11AI.4263

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Ric Holden**

Mailing Address 164 Road 253

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Rancher

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2013

Transaction ID : SA11AI.4265

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Paul M. Hopfauf**

Mailing Address 318 Sunset Ave.

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WBI Energy

Occupation

Executive

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2013

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Thomas K. Hopgood**

Mailing Address 38 Forest Park Dr.

City

Clancy

State

MT

Zip Code

59634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Montana Mining Association

Occupation

Executive Director

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

Transaction ID : SA11AI.4267

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

1250.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Travis R. Kavulla**

Mailing Address 8073 US Highway 89

City

Great Falls

State

MT

Zip Code

59405

FEC ID number of contributing federal political committee.

C

Name of Employer

State of Montana

Occupation

Public Service Commissioner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2013

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mary Ellen Lantis**

Mailing Address P.O. Box 699

City

Spearfish

State

SD

Zip Code

57783

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Nursing Home Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2013

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**Toni Martini**

Mailing Address P.O. Box 196

City

Sidney

State

MT

Zip Code

59270

FEC ID number of contributing federal political committee.

C

Name of Employer

Martini Siding and Windows

Occupation

Contractor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 12 / 2013

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Gregory McGovern**

Mailing Address 115 Georgetown Drive

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Grocer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2013

Transaction ID : SA11AI.4280

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Sandra K. McGovern**

Mailing Address P.O. Box 464

City

Glendive

State

MT

Zip Code

59330-0464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2013

Transaction ID : SA11AI.4281

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Craig McPherson**

Mailing Address 86 Road 555

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 21 2013

Transaction ID : SA11AI.4282

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 35  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MATT ROSENDALE FOR MONTANA**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Duane Mitchell</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2013	
Mailing Address 221 Lincoln Ave S		<b>Transaction ID : SA11AI.4284</b>	
City Sidney	State MT	Zip Code 59270-3924	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Richland County	Occupation County Commissioner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Michael R. Newton</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2013	
Mailing Address 316 Chestnut		<b>Transaction ID : SA11AI.4287</b>	
City Glendive	State MT	Zip Code 59330	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Fishers Sand and Gravel	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ryan J. Osmundson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2013	
Mailing Address 2288 U-bet Rd.		<b>Transaction ID : SA11AI.4290</b>	
City Buffalo	State MT	Zip Code 59418	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Fertilizer Saleman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1800.00	
<b>TOTAL</b> This Period (last page this line number only).....			



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Dale L. Patterson**

Mailing Address 16220 NE 172nd Way

City

Brush Prairie

State

WA

Zip Code

98606-6310

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Nursing Home Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2013

Transaction ID : SA11AI.4291

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Steve Pust**

Mailing Address 11153 Highway 16

City

Savage

State

MT

Zip Code

59262-9414

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 25 / 2013

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**John R. Reynolds**

Mailing Address 1204 14th St. SW

City

Sidney

State

MT

Zip Code

59270

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Grocer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2013

Transaction ID : SA11AI.4295

Amount of Each Receipt this Period

1000.00

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Debbie Rice**

Mailing Address 94 Road 555

City

Glendive

State

MT

Zip Code

59330

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2013

Transaction ID : SA11AI.4297

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Connie Ripley**

Mailing Address 306 Jefferson School Rd.

City

Glendive

State

MT

Zip Code

59330-3407

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2013

Transaction ID : SA11AI.4298

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Joe Roberts**

Mailing Address 1821 Jerome Place

City

Helena

State

MT

Zip Code

59601

FEC ID number of contributing federal political committee.

C

Name of Employer

Roberts Consulting

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2013

Transaction ID : SA11AI.4300

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Daniel D. Rosendale**

A.

Mailing Address 103 N. Liberty Street

City

Centreville

State

MD

Zip Code

21517

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 30 2013

Transaction ID : SA11AI.4302

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Michael Rosendale**

B.

Mailing Address 216 Island Plaza Ct.

City

Stevensville

State

MD

Zip Code

21666

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 26 2013

Transaction ID : SA11AI.4303

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Tammy Rosendale**

C.

Mailing Address 216 Island Plaza Ct.

City

Stevensville

State

MD

Zip Code

21666

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 26 2013

Transaction ID : SA11AI.4304

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Thomas C. Ryan**

Mailing Address P.O. Box 117

City

Billings

State

MT

Zip Code

59103

FEC ID number of contributing federal political committee.

C

Name of Employer

Montana Oil Properties

Occupation

Oil &amp; Gas

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2013

Transaction ID : SA11AI.4305

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Thomas C. Ryan**

Mailing Address P.O. Box 117

City

Billings

State

MT

Zip Code

59103

FEC ID number of contributing federal political committee.

C

Name of Employer

Montana Oil Properties

Occupation

Oil &amp; Gas

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2013

Transaction ID : SA11AI.4306

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Kenneth J. Schell**

Mailing Address P.O. Box 1073

City

Baker

State

MT

Zip Code

59313-1073

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Grocer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2013

Transaction ID : SA11AI.4310

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

6200.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Alan W. Sevier**

Mailing Address 229 Georgetown Drive

City

Glendive

State

MT

Zip Code

59330-2906

FEC ID number of contributing federal political committee.

C

Name of Employer

Edward Jones

Occupation

Financial Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 23 / 2013

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Sandra Silha**

Mailing Address P.O. Box 721

City

Glendive

State

MT

Zip Code

59330-0721

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 10 / 2013

Transaction ID : SA11AI.4312

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**Terry K. Spencer**

Mailing Address 7521 S 125th W Ave

City

Sapulpa

State

OK

Zip Code

74066

FEC ID number of contributing federal political committee.

C

Name of Employer

One Ok Co

Occupation

Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2013

Transaction ID : SA11AI.4314

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2550.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Scott J. Staffanson**

Mailing Address 34704 County Road 122

City  
Sidney

State  
MT

Zip Code  
59270

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
farmer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 14 / 2013

Transaction ID : SA11AI.4315

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Donald Steinbeisser**

Mailing Address 11918 County Rd. 348

City  
Sidney

State  
MT

Zip Code  
52970

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Reitred

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2013

Transaction ID : SA11AI.4317

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**Joe G. Steinbeisser Jr.**

Mailing Address 690 22nd Ave. NW

City  
Sidney

State  
MT

Zip Code  
59270

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2013

Transaction ID : SA11AI.4316

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**W & L Rentals LLC**

**A.**

Mailing Address 28589 Brick Row Dr.

City

Oxford

State

MD

Zip Code

21654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2013

**Transaction ID : SA11AI.4378**

Amount of Each Receipt this Period

2500.00

See Attribution Below

Full Name (Last, First, Middle Initial)

**William III Schuman**

**B.**

Mailing Address 28589 Brick Row Dr.

City

Oxford

State

MD

Zip Code

21654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

W&L Rentals LLC

Occupation

Partner

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2013

**Transaction ID : SA11AI.4378.0**

Amount of Each Receipt this Period

1250.00

Partnership Attribution

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**Linda Schuman**

**C.**

Mailing Address 28589 Brick Row Dr.

City

Oxford

State

MD

Zip Code

21654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

W&L Rentals, LLC

Occupation

Partner

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2013

**Transaction ID : SA11AI.4378.1**

Amount of Each Receipt this Period

1250.00

Partnership Attribution

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Diana Waterman**

A.

Mailing Address 560 Sparks Mill Road

City

Centreville

State

MD

Zip Code

21617

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 03 / 2013

Transaction ID : SA11AI.4324

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mareen D. Waterman**

B.

Mailing Address 1 Watermans Way

City

Queenstown

State

MD

Zip Code

21658-1179

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2013

Transaction ID : SA11AI.4325

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Arthur V. Wittich**

C.

Mailing Address 3116 Sourdough Rd.

City

Bozeman

State

MT

Zip Code

59715

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2013

Transaction ID : SA11AI.4329

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4100.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**James K. Wood**

A.

Mailing Address PO Box 281

City

Glendive

State

MT

Zip Code

59330-0281

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Rancher

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2013

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**James K. Wood**

B.

Mailing Address PO Box 281

City

Glendive

State

MT

Zip Code

59330-0281

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Rancher

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2013

Transaction ID : SA11AI.4331

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Moe Wosepka**

C.

Mailing Address 4155 Fox Hollow Drive

City

Helena

State

MT

Zip Code

59602

FEC ID number of contributing federal political committee.

C

Name of Employer

Catholic Conference of Montana

Occupation

Executive Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 28 / 2013

Transaction ID : SA11AI.4333

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5450.00

63500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 35

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**National Roofing Contractors Assoc PAC**

Mailing Address 10255 W. Higgins Rd., No. 600

City

Rosemont

State

IL

Zip Code

60018

FEC ID number of contributing  
federal political committee.

**C** C00244863

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2013

**Transaction ID : SA11C.4336**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 35

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**Matt Rosendale**

Mailing Address 1954 Hwy 16

City

Glendive

State

MT

Zip Code

59330-9218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Montana

Occupation

State Senator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2013

Transaction ID : SA13A.4377

Amount of Each Receipt this Period

50000.00

Loan from Personal Funds

Full Name (Last, First, Middle Initial)

**Matt Rosendale**

Mailing Address 1954 Hwy 16

City

Glendive

State

MT

Zip Code

59330-9218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Montana

Occupation

State Senator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2013

Transaction ID : SA13A.4371

Amount of Each Receipt this Period

200000.00

Loan from Personal Funds

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

250000.00

250000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Align Media LLC**

Mailing Address 921 Calvary Ride Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2013

City	State	Zip Code
Austin	TX	78732

Amount of Each Disbursement this Period

1300.00
---------

Purpose of Disbursement  
Monthly License FeeCategory/  
Type**Transaction ID : SB17.4354**

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Align Media LLC**

Mailing Address 921 Calvary Ride Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2013

City	State	Zip Code
Austin	TX	78732

Amount of Each Disbursement this Period

533.00
--------

Purpose of Disbursement  
Monthly License FeeCategory/  
Type**Transaction ID : SB17.4358**

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Align Media LLC**

Mailing Address 921 Calvary Ride Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2013

City	State	Zip Code
Austin	TX	78732

Amount of Each Disbursement this Period

1300.00
---------

Purpose of Disbursement  
Monthly License FeeCategory/  
Type**Transaction ID : SB17.4367**

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3133.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Magellan Strategies**

Mailing Address 1685 Boxelder St., Ste. 300

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2013

City	State	Zip Code
Louisville	CO	80027

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Voter FileCategory/  
Type

Transaction ID : SB17.4342

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Marathon Strategic Communications**

Mailing Address 3771 Vinecrest Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2013

City	State	Zip Code
Dallas	TX	75229

Amount of Each Disbursement this Period

10000.00
----------

Purpose of Disbursement  
Consulting - StrategicCategory/  
Type

Transaction ID : SB17.4346

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Marathon Strategic Communications**

Mailing Address 3771 Vinecrest Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2013

City	State	Zip Code
Dallas	TX	75229

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Consulting - StrategicCategory/  
Type

Transaction ID : SB17.4359

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

17500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. The Prosper Group Corporation**

Mailing Address 435 East Main St., Ste. 250

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement  
Advertising, Website Expenses

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2013

Amount of Each Disbursement this Period

17500.00
----------

Transaction ID : SB17.4344

**B. Thomas Graphics, Inc.**

Mailing Address PO Box 142226

City	State	Zip Code
Austin	TX	78714-2226

Purpose of Disbursement  
Printing

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2013

Amount of Each Disbursement this Period

412.44
--------

Transaction ID : SB17.4356

**c. Thomas Graphics, Inc.**

Mailing Address PO Box 142226

City	State	Zip Code
Austin	TX	78714-2226

Purpose of Disbursement  
Printing

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2013

Amount of Each Disbursement this Period

115.53
--------

Transaction ID : SB17.4368

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

18027.97

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Scott Yeldell**

Mailing Address 713 Patchway Ln

City	State	Zip Code
Austin	TX	78748

Purpose of Disbursement  
Reimbursement - Airfare, Transportation (see below if itemized)

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2013

Amount of Each Disbursement this Period

930.88
--------

Transaction ID : SB17.4348

**B. United Airlines**

Mailing Address 233 S. Wacker Drive

City	State	Zip Code
Chicago	IL	60606

Purpose of Disbursement  
Airfare

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2013

Amount of Each Disbursement this Period

572.60
--------

Transaction ID : SB17.4348.0

[MEMO ITEM]

**C. Enterproce Rent-A-Car**

Mailing Address 850 Gallatin Field Rd. Ste. 7

City	State	Zip Code
Belgrade	MT	59714-8546

Purpose of Disbursement  
Transportation

Candidate Name

**MATT ROSENDALE FOR MONTANA**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2013

Amount of Each Disbursement this Period

358.28
--------

Transaction ID : SB17.4348.1

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

930.88

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

**A. Scott Yeldell**

Mailing Address 713 Patchway Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2013

City	State	Zip Code
Austin	TX	78748

Amount of Each Disbursement this Period

932.12
--------

Purpose of Disbursement  
Reimbursement - Airfare, Lodging (see below if itemized)

Transaction ID : SB17.4360

Candidate Name

**MATT ROSENDALE FOR MONTANA**Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address P.O. Box 36647-1CR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2013

City	State	Zip Code
Dallas	TX	75235

Amount of Each Disbursement this Period

596.80
--------

Purpose of Disbursement  
Airfare

Transaction ID : SB17.4360.0

Candidate Name

**MATT ROSENDALE FOR MONTANA**Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Hyatt Regency Capitol Hill**

Mailing Address 400 New Jersey Ave NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2013

City	State	Zip Code
Washington	DC	20001

Amount of Each Disbursement this Period

335.32
--------

Purpose of Disbursement  
Lodging

Transaction ID : SB17.4360.1

Candidate Name

**MATT ROSENDALE FOR MONTANA**Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

932.12

40523.97



**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 33 OF 35

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4377

**MATT ROSENDALE FOR MONTANA****LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2014

**Matt Rosendale**☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1954 Hwy 16

City

State

ZIP Code

Glendive

MT

59330-9218

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
07 / 31 / 2013

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 34 OF 35

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4371

MATT ROSENDALE FOR MONTANA

LOAN SOURCE Full Name (Last, First, Middle Initial)

Matt Rosendale

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1954 Hwy 16

City

State

ZIP Code

Glendive

MT

59330-9218

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 05 / 2013

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200000.00

**TOTALS** This Period (last page in this line only)..... ►

250000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 35 OF 35

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**MATT ROSENDALE FOR MONTANA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Prosper Group Corporation**

Nature of Debt (Purpose):

Website Expenses

Mailing Address 435 East Main St., Ste. 250

City State

Zip Code

Greenwood

IN

46143

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4373

Amount Incurred This Period

812.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

812.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

812.40

2) **TOTALS** This Period (last page this line number only) ..... ▶

812.40

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

250812.40